

Description of Assets on Hand Do not list financial account numbers here; list confidential information on Form 11.1	Value
1. Bank Account (include verification form 15-CVF)	
2. Stocks (include verification form 15-CVS)	
3.	
4.	
5.	
6.	
7.	
Less: accrued attorney fees and accrued conservator fees	()
Total Personal Property Assets on Hand <i>(This total must match total personal property assets on hand, above)</i>	

1. Tangible personal property ____ was / ____ was not, disposed of during the year.
2. Real estate ____ was / ____ was not, disposed of during the year.
(If real estate is sold during the year you must attach a closing statement to this account)
3. The conservator represents that there is/are on file and in force the following bond(s) (list the name and address of each bonding company and the amount of each bond):

4. The protected person’s current address and phone number is:

5. CHOOSE ONE OF THE FOLLOWING:
 - The conservator does not request a hearing to examine, settle, and allow this Account.
 - The conservator requests a hearing to examine and, settle, and allow this Account.
 - This is a Final Account and the conservator requests to be discharged from its duties and that the conservator's surety, if any, be discharged.

Note: A hearing is required:

*If this is a final account

*If it has been five years since the last account was heard and allowed, See Gen.Rul.Prac.Dist.Ct., Rule 416 (but note that Ramsey County and Hennepin County require a hearing after the first annual account and every third year thereafter; also note accounts of \$20,000 or less may be waived by the court)

STATE OF MINNESOTA

COUNTY OF _____

I _____ being duly sworn/affirm, ***under penalties of perjury***, say that I have read this account, including the confidential portion therein, that this account is the true and full account of my administration of the estate and of all property belonging to the protected person which has come into my hands or to my knowledge, that I do not know of any error in the account, that I have read the petition and that it is true; and notice to the protected person of the right to petition for restoration to capacity, discharge of conservator, or modification of the orders of conservatorship, has been given to the protected person, and that a copy of the account has been given to the protected person, by _____ MAIL or _____ IN PERSON by _____ (by whom served).

Dated: _____, 20__

Signature of Conservator

Name: _____

Address: _____

Telephone: _____

Subscribed and Sworn to before me
this _____, 20__.

Signature of Notary

Name of Petitioner's Attorney:

Name: _____

License No.: _____

Address: _____

Telephone: _____

State of Minnesota

County of _____

District Court
Judicial District

Probate / Mental Health Division

Court File No. _____

Case Type: 14, Conservatorship

In Re: Conservatorship of
_____, Protected Person

**CONSERVATORSHIP ACCOUNT
FINANCIAL SOURCE DOCUMENT
FORM 11.2**

(Provided in Accordance With Rule 11 of the Minnesota General Rules of Practice)

THIS LISTING OF SEALED FINANCIAL SOURCE DOCUMENTS IS ACCESSIBLE TO THE PUBLIC BUT THE SOURCE DOCUMENTS SHALL NOT BE ACCESSIBLE TO THE PUBLIC EXCEPT AS AUTHORIZED BY COURT RULE OR ORDER

- Bank statements
Periods covered: _____
- Credit card statement
Periods covered: _____
- Verification of Funds on Deposit
- Verification of Stocks and Other Securities
- Other: _____

Information supplied by:

Dated: _____

Name of Petitioner's Attorney:

Name: _____

License No.: _____

Address: _____

City/State/Zip: _____

Telephone: _____

State of Minnesota

County of _____

District Court
Judicial District
Probate / Mental Health Division
Court File No. _____

Case Type: 14, Conservatorship

In Re: Conservatorship of
_____, Protected Person

**CONSERVATORSHIP ACCOUNT
CONFIDENTIAL INFORMATION FORM 11.1**
(Provided in Accordance With Rule 11 of the Minnesota
General Rules of Practice)

**The information on this form is
confidential and shall not be placed
in a publicly accessible portion of a file.**

NAME

SOCIAL SECURITY NUMBER

BANK ACCOUNT NUMBERS

OTHER FINANCIAL ACCOUNT NUMBERS

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____
- 9. _____
- 10. _____
- 11. _____
- 12. _____

* Add supplemental information if needed

Information supplied by:

Dated: _____

Name of Petitioner's Attorney:

Name: _____

License No.: _____

Address: _____

City/State/Zip: _____

Telephone: _____

State of Minnesota

County of _____

District Court
Judicial District

Probate / Mental Health Division

Court File No. _____

Case Type: 14, Conservatorship

In Re: Conservatorship of

_____,

Protected Person

Verification of Funds on Deposit

(File as a Financial Source Document with Form 11.2)

Name of Protected Person: _____

Name and Address of Financial Institution:

Accounts listed below were
accurate as of : (mo./day/yr.)

Account Information:

Type of Account	Account Number	Depositor Account Title	Interest Earned	Current Rate of Interest	Current Balance (including interest)

I certify that the foregoing amounts were on deposit to the credit of the above named fiduciary as shown by the records of this financial institution.

(SEAL OR STAMP OF FINANCIAL INSTITUTION)

TITLE OF CERTIFYING OFFICIAL

SIGNATURE OF CERTIFYING FINANCIAL INSTITUTION OFFICIAL DATE

State of Minnesota

County of _____

District Court
Judicial District

Probate / Mental Health Division

Court File No. _____

Case Type: 14, Conservatorship

In Re: Conservatorship of

Verification of Stocks and Other Securities

(File as a Financial Source Document with Form 11.2)

_____,

Protected Person

Name of Protected Person: _____

Name and Address of Financial Institution:

Accounts listed below were
accurate as of : (mo./day/yr.)

Account Information:

Number of Units/Shares	Name of Stock or Account Title

Remarks: _____

(SEAL OR STAMP OF FINANCIAL INSTITUTION)

I certify that the foregoing amounts were on deposit
to the credit of the above named fiduciary as shown
by the records of this financial institution.

TITLE OF CERTIFYING OFFICIAL

SIGNATURE OF CERTIFYING FINANCIAL INSTITUTION OFFICIAL DATE